AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS TYPE: [X]IXC [X]CLEC []ILEC []Wireless

| | - | CE | RTIFICATED COM | PANY INCORMATION | 2010-134.A | |
|--|--|--------------|---|--|--------------------------------------|--|
| Dialtone & Mo | re, Inc | | | | | |
| Company Nan | | • | | | | |
| | | | | <u>888-494-944</u> | | |
| Dba/fka | | | | Telephone # | Ŧ | |
| 6905 N. Wick | | Suite 403 | | | | |
| Mailing Addre | | | | | | |
| Melbourne, FL 32940 | | | | | | |
| City, State, Zip Code | | | | | | |
| 6905 N. Wickham Road, Suite 403 Business Location | | | | | | |
| | | | | Brevard | | |
| Melbourne, FL 32940 City, State, Zip Code | | | | County | The state of | |
| Oity, Otato, E., | | | | NE INCODINATION | 0,0 | |
| | | | REGISTERED AGE | NIINFORMATION | CK. | |
| Registered Ag | ent: <u>Incorp S</u> | ervices, Inc | <u>). </u> | | | |
| NA COLUMN A RAINE | 047 Duth | \/ioto | | | | |
| Mailing Addre | ss: <u>317 Ruill</u> | vista | | | | |
| City, State, Zip Code: Lexington, SC 29073 | | | | | | |
| | | | ulan and regulations | nrint or type company of | ontact for the following areas: | |
| Pursuan | t to the Comr | nission s ru | les and regulations, | print or type company of | ontact for the following areas: | |
| A. Thoma | s Biddix | | | | | |
| Gener | General Manager (Include address if different than above.) | | | | | |
| | 3-1333 | 1 | 321-275-4877 <i>I</i> | E-mail Address | | |
| Teleph | one Number | | Facsimile Number | E-Mail Address | | |
| B. Chris M | Chris Melton | | | | | |
| | Customer Relations /Complaints Representative (Include address if different than above.) | | | | | |
| | 3-4295 one Number | | 813-862-2318 / c Facsimile Number | cmelton@telecomgroup.com E-mail Address | | |
| reiepii | one Number | | r dodining riemes | | | |
| C1. Chris I | Melton | Complaints I | Representative for Esca | alated Complaints (Includ | de address if different than above.) | |
| | 73-4295 | / complaints | | cmelton@telecomgroup.com | | |
| | one Number | | Facsimile Number | E-mail Address | | |
| C2. 888-49 | 94-9440 | | _ | | | |
| Custo | mer Contact (T | oll Free Num | iber) | | | |
| D | | | | | | |
| Engin | Engineering Operations (Include address if different than above.) | | | | | |
| | 94-9440 | / 813-8 | 62-2318 | / E-mail Address | | |
| Teleph | one Number | | Facsimile Number | E-Hiali Audiess | | |
| E (I to be a delicated for above) | | | | | | |
| Test and Repair (Include address if different than above.) | | | | | | |
| | 94-9440 none Number | _/ 813-8 | 62-2318 Facsimile Number | E-mail Address | | |

| F. | Chris Melton | |
|-------------|--|---|
| | Emergencies (During non-office hours) | |
| | CET 010 1200 | elton@telecomgroup.com |
| | Telephone Number Facsimile Number | E-mail Address |
| In additi | on please provide the following company contact informati | on to assist in proper routing of correspondence and invoices |
| 111 00 0111 | | |
| G. | David Gainer | 1 |
| | Regulatory Officer (Include address if different than above | • |
| | 021 0.0 10.0 | ulatory@telecomgroup.com E-mail Address |
| | Tolophono Halling S. | E mail Addisor |
| Н. | <u>David Gainer</u> Dual Party Mailings (Name) | |
| | | |
| | 6905 N. Wickham Road, Suite 403 Melbourne, FL 32940 Mailing Address | |
| | 321-373-4343 / 813-862-2318 / reg | ulatory@telecomgroup.com |
| | Telephone Number Facsimile Number | E-mail Address |
| I. | David Gainer | |
| | Interim LEC Fund Mailings (Name) | |
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| | Mailing Address 321-373-4343 / 813-862-2318 / reg | ulatory@telecomgroup.com |
| | <u>321-373-4343</u> / <u>813-862-2318</u> / reg Telephone Number Facsimile Number | E-mail Address |
| | Tolophono Hambol | |
| J. | David Gainer Universal Service Fund Mailings (Name) | |
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| | Mailing Address | |
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| K. | David Gainer | |
| | Gross Receipts Mailings (Name) | |
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| | Telephone Number Facsimile Number | E-mail Address |
| L. | David Gainer | |
| L . | Lifeline Mailings (Name) | |
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| | Mailing Address | |
| | 02 0.0 10.0 | ulatory@telecomgroup.com E-mail Address |
| | Telephone Number Facsimile Number | L-IIIali Addiess |
| DOCKE | T #: CLEC - 1998-50-C; IXC - 2005-123-C; ETC - 2008- | 138-C |
| | | ~ / |
| | Thomas E. Biddix This form was completed by (print name) | Signature |
| | This form was completed by (print name) | · |
| | <u>Director</u> | 9/21/2010 Date |
| | Title | Date |
| | RETURN COMPLETED FORM TO: | |

Public Service Commission of SC **Docketing Department**Post Office Drawer 11649
Columbia, South Carolina 29211

Office of Regulatory Staff Attn: Jeanne Gordon 1401 Main Street, Suite 900 Columbia, South Carolina 29201